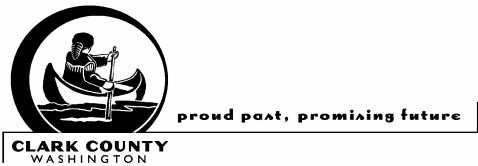


SPA LOG



Pool Name_____

Address _____

Month_____ Year _____

Pool Manager_____

Minimum Turnover Required (gpm) _____

Type of Disinfectant _____

HEALTH DEPARTMENT

Test Daily						Test Weekly		Record When Applied			
Disinfectant: Free Chlorine Residual (Minimum 3.0 ppm, Maximum 10.0 PPM). Check at least 3 times daily.						Alkalinity: Suggest range of 80-200 ppm	Cyanuric Acid: if used, Max 90 ppm	Disinfectant Qty/Day: __ Lbs __ Gals __ Oz __ Tabs	Other Chemicals Added. Note chem/qty	Misc. Problems: closures, remarks, backwash of filter, clarity, injury, etc.	
Date	Time/PPM	Time/PPM	Time/PPM	Time/PPM	Time/PPM						
1									_____		
2									_____		
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